UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

		DI : .'.CC		APPLICATION TO PROCEED				
		Plaintiff			HOUT PREPAYMENT OF S AND AFFIDAVIT			
		v.						
		Defendant						
				Case	Number:			
,			, declare that	I am the (check	the appropriate box)			
9			petitioner/plainti	ff/movant				
			9 other					
		titled proceeding; that in support of the to pay the costs of these procee						
n sup	port of th	nis application, I answer the follo	wing questions under the	he penalty of pe	rjury:			
l.	Are yo	ou presently incarcerated?	9 Yes	9 No	(If "No" go to Par	12)		
	If "Yes	s" state the place of your incarce	ration					
	Are y	ou employed at the institution?	Do you rece	ive any paymen	t from the institution?			
		the institution fill out the Certificating at least the past six months' tr		avit and attach a	a ledger sheet from the instituti	on (s) of your incarceration		
2.	Are yo	ou presently employed?	9 Yes	9 No				
	a.	If the answer is "Yes" state the employer.	amount of your take-ho	ome salary or wa	ages and pay period and give the	ne name and address of your		
	b.	If the answer is "No" state the co		t, and the amou	nt of your take-home salary an	d wages and pay period and		
3.	In the past 12 twelve months have you received any money from any of the following sources? a. Business, profession or other form of self-employment 9 Yes 9 No							
	a.	b. Rent payments, interest or dividends			9 _{No}			
	b.				9 No			
	c.	• •			9 No	0		
	Error	! Number cannot be represented	in specified format	Disability or w	vorkers compensation payment 9 No	s 9 Yes		
	e.	Gifts or inheritances		9 Yes	9 No			
	f.	Any other sources		9 Yes	9 No			

			0						
4.	Do you have any cash, o	r checking or savings accounts?	9 Yes	9 _{No}					
	If "Yes" state the total an	nount							
5.	Do you own any real estate, stocks, bonds, securities, or other financial instruments, automobiles or any other thing of value?								
	9 Yes 9 No If "Yes" describe the property and state its value.								
6.	List the persons who are to their support.	dependent upon you for support, st	ate your relat	ionship to each person and indicate ho	ow much you contribute				
I declai	e under penalty of perjury	that the foregoing is true and correc	t.						
	Date	Signature of Ap	plicant						
certifie	d by the appropriate institu	tional officer showing all receipts,	expenditures,	tating all assets. In addition, a prisoner and balances during the last six mon- le institutions, attach one certified sta-	ths in your institutional				
		CER	ГІГІСАТЕ						
		(Incarcerated) (To be completed by the	d applicants or e institution of						
I certify	y that the applicant named	herein has the sum of \$	01	n account to his/her credit at (name of	institution)				
	I furthe	er certify that the applicant has the f	Collowing secu	nrities to his/her credit:	I further				
certify	that during the past six mo	nths the applicant's average balance	e was \$						
	DATE	SIGNATURE OF AUTHORIZED O	OFFICER						

If the answer to any of the above is "Yes" describe each source of money and state the amount received and what you expect you will

continue to receive.